

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective December 8, 2004

10/68/216

**CLAIMS AS FILED - PART I**

|   | (Column 1)   | (Column 2)   |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | minus 20=    | *            |
| INDEPENDENT CLAIMS  | minus 3 =    | *            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 150.00 |
| X\$ 25=   |        |
| X100=     |        |
| +180=     |        |
| TOTAL     |        |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 300.00 |
| X\$50=    |        |
| X200=     |        |
| +360=     |        |
| TOTAL     |        |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | 2/22/5                           |                                    |               |
| Total   | * 29                             | Minus                              | -- 33 =       |
| Independent   | * 7                              | Minus                              | --- 7 =       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$ 25=        |                |
| X100=          |                |
| +180=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$50=         |                |
| X200=          |                |
| +360=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | 7/22/05                          |                                    |               |
| Total   | * 29                             | Minus                              | -- 24 =       |
| Independent   | * 4                              | Minus                              | --- 4 =       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$ 25=        |                |
| X100=          |                |
| +180=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$50=         |                |
| X200=          |                |
| +360=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus                              | -- =          |
| Independent   | *                                | Minus                              | --- =         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE    | ADDITIONAL FEE |
|---------|----------------|
| X\$ 25= |                |
| X100=   |                |
| +180=   |                |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$50= |                |
| X200=  |                |
| +360=  |                |